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United States Bankruptcy Court Eastern District of Michigan, Detroit Division

IN RE:		Case No
MIAH, MOHAMMAD B		Chapter 7
	Debtor(s)	^
	VERIFICATION OF CREDITOR M	ATRIX
The above named debtor(s) he	reby verify(ies) that the attached matrix listing cre	editors is true to the best of my(our) knowledge.
Date: May 2, 2019	Signature: /s/ MOHAMMAD B MIAH	
	MOHAMMAD B MIAH	Debtor
Date:	Signature:	
		Joint Debtor, if any

Account Services Colls 1802 NE Loop 410 Ste 400 San Antonio, TX 78217-5221

ADELSON EYE 41620 6 Mile Rd Ste 102 Northville, MI 48168-8528

AMAZON CREDIT PO Box 15123 Wilmington, DE 19850-5123

AMERICAN RECOVERY 34505 W 12 Mile Rd Ste 333 Farmington Hills, MI 48331-3288

Amex/Dsnb PO Box 8218 Mason, OH 45040-8218

Bmw Financial Services 5515 Parkcenter Cir Dublin, OH 43017-3584

Chase Card PO Box 15369 Wilmington, DE 19850-5369 Citi PO Box 6241 Sioux Falls, SD 57117-6241

Comenitybank/wayfair PO Box 182789 Columbus, OH 43218-2789

Comenitycb/gardnerwht PO Box 182120 Columbus, OH 43218-2120

DIRECT TV PO Box 6550 Greenwood Village, CO 80155-6550

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

KRISLEE FINANCIAL CORPORATION 2928 Bloomfield Park Dr West Bloomfield, MI 48323-3506

Macys/dsnb PO Box 8218 Mason, OH 45040-8218 MICH INSTIT UROLOGY 20952 E 12 Mile Rd Ste 200 Saint Clair Shores, MI 48081-3203

New Res-Shellpoint Mtg 55 Beattie Pl Greenville, SC 29601-2165

OAKLAND DOAGNOSTICS 29992 Northwestern Hwy Ste C Farmington Hills, MI 48334-3292

SAFETY LAWN CARE 35450 Mound Rd Sterling Heights, MI 48310-4721

SCHNEIDERMAN AND SHERMAN 23938 Research Dr Ste 300 Farmington Hills, MI 48335-2605

Tbom/Atls/Fortiva Thd PO Box 105555 Atlanta, GA 30348-5555

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Printed Name(s) of Debtor(s)

Case No. (if known)

United States Bankruptcy Court Eastern District of Michigan, Detroit Division

IN RE:	Case No	
MIAH, MOHAMMAD B	Chapter 7	
Debtor(s)	· -	
	NOTICE TO CONSUMER DEBTOR(S) OF THE BANKRUPTCY CODE	
Certificate of [Non-A	ttorney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing notice, as required by § 342(b) of the Bankruptcy Code.	the debtor's petition, hereby certify that I delivered to the	debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Pre Address:	Social Security number petition preparer is not the Social Security num principal, responsible p the bankruptcy petition	an individual, state aber of the officer, person, or partner of
X	(Required by 11 U.S.C	
Signature of Bankruptcy Petition Preparer of officer, prin partner whose Social Security number is provided above.		
Cer	rtificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and	d read the attached notice, as required by § 342(b) of the E	Sankruptcy Code.
MIAH, MOHAMMAD B	X /s/ MOHAMMAD B MIAH	5/02/2019

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Debtor

Signature of Joint Debtor (if any)

Date

Date

Fill in th	is information to identi	fy your case:		
Debtor 1	MOHAMMAD B N First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle Nesse	Loot None	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTR	ICT OF MICHIGAN, DETROIT DIVISION	
Case number _				
(if known)				Check if this is an amended filing
				amended ming
Off: 5: 51 E 5	100			
Official Fo				_
Statemer	nt of Intentio	on for Indiv	iduals Filing Under Chapteر	er / 12/15
If you are an indi	vidual filing under cha	oter 7 vou must fill	out this form if	
-	e claims secured by yo	-	out this form ii.	
_	ed personal property a		et expired.	
You must file this	s form with the court w	ithin 30 days after y	ou file your bankruptcy petition or by the date set for	
wnicne the forr	•	e court extends the	time for cause. You must also send copies to the co	reditors and lessors you list on
If two married ne	onle are filing together	in a joint case, hot	n are equally responsible for supplying correct info	rmation Both debtors must sign
	te the form.	iii a joint case, boti	rare equally responsible for supplying correct into	mation. Both debtors must sign
Be as complete a	and accurate as possibl	e. If more space is I	needed, attach a separate sheet to this form. On the	top of any additional pages.
	our name and case num			top or any damments pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1. For any creditor information be	-	art 1 of Schedule D:	Creditors Who Have Claims Secured by Property (C	Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property that	Did you claim the property
			secures a debt?	as exempt on Schedule C?
.		_	_	_
Creditor's N	lew Res-Shellpoint I	Vitg	☐ Surrender the property.	□ No
name.			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	■ Yes
Description of	,	Warren, MI	Agreement.	
property	48091-3946		Retain the property and [explain]:	
securing debt:			Retain and pay pursuant to contract	_
Part 2: List Yo	our Unexpired Persona	I Property Leases		
For any unexpire	d personal property lea	ase that you listed i	n Schedule G: Executory Contracts and Unexpired I	
			ired leases are leases that are still in effect; the leas ustee does not assume it. 11 U.S.C. § 365(p)(2).	e period has not yet ended. You
		-	- ""	
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:				□ No
				-
Official Form 108		Statement of In	tention for Individuals Filing Under Chapter 7	page 1

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Debtor 1 MIAH, MOHAMMAD B	Case number (if known)
Description of leased Property:	□ v
гторыцу.	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention al property that is subject to an unexpired lease.	pout any property of my estate that secures a debt and any personal
X /s/ MOHAMMAD B MIAH	X
MOHAMMAD B MIAH	Signature of Debtor 2
Signature of Debtor 1	
Date May 2, 2019	Date

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN, DETROIT DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	MOHAMMAD	
		government-issued ure identification (for	First name	First name
	exar	nple, your driver's	В	
	licer	ise or passport).	Middle name	Middle name
		g your picture	MIAH	
		tification to your meeting the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or		
	maio	den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-7179	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		2538 Donna Ave Warren, MI 48091-3946	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Macomb	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	tor 1	MIAH, MOHAMMA	AD B				Case number (if known)	
Par	t 2 :	Tell the Court About Y	our Ban	kruptcy Ca	se			
7.	Bank	chapter of the ruptcy Code you are				ch, see <i>Notice Required by 1</i> check the appropriate box.	1 U.S.C. § 342(b) for Individuals Filing for Bankr	uptcy (Form
	cnoo	sing to file under	■ Cha	pter 7				
			☐ Cha	pter 11				
			☐ Cha	pter 12				
			☐ Cha	pter 13				
8.	How	you will pay the fee	— al	oout how yo	u may pay. Typically, ey is submitting your p	if you are paying the fee your	with the clerk's office in your local court for more self, you may pay with cash, cashier's check, or attorney may pay with a credit card or check with	money order.
							n, sign and attach the Application for Individuals	to Pay The
				J	Installments (Official F It my fee be waived	,	only if you are filing for Chapter 7. By law, a judg	ge may, but is
			no	ot required t	o, waive your fee, and	I may do so only if your incom	ne is less than 150% of the official poverty line th	at applies to
						e to pay the ree in installment Waived (Official Form 103B)	 s). If you choose this option, you must fill out the and file it with your petition. 	Application
9.	bank	you filed for ruptcy within the last	■ No.					
	8 yea	irs?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		ny bankruptcy cases ing or being filed by	■ No					
	a spo this o a bus	buse who is not filing case with you, or by siness partner, or by filiate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your ence?	■ No.	Go to I	ine 12.			
			☐ Yes.	Has yo	our landlord obtained	an eviction judgment agains	st you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Si</i> bankruptcy petition.	tatement About an Eviction J	udgment Against You (Form 101A) and file it as	part of this

Deb	otor 1 MIAH, MOHAMMA	AD B			Case number (if known)
Par	Report About Any Bus	sinesses \	ou Own	as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, Sta	te & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you inc s, cash-flo	dicate that you are a ow statement, and fe	court must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of ideral income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 MIAH, MOHAMMAD B Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, vour case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 MIAH, MOHAMMA	AD B			Case no	umber (if known)	
ar	6: Answer These Question	ons for Repo	rting Purposes				
16.	What kind of debts do you have?			consumer debts? Consumersonal, family, or household		defined in 11 U.S.C.§ 101(8) as "incurred by an	
			No. Go to line 16b.				
			Yes. Go to line 17.				
				business debts? Business		ebts that you incurred to obtain money s or investment.	
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. S	tate the type of debts you	owe that are not consumer of	debts or busin	ness debts	
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapt	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			Do you estimate that after a able to distribute to unsecur		roperty is excluded and administrative expenses are	
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		No Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000)	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?			\$1,000,001 - \$ \$10,000,001 - \$ \$50,000,001 - \$ \$100,000,001	\$50 million \$100 million		
20.	How much do you estimate your liabilities to be?			\$1,000,001 - \$ \$10,000,001 - \$ \$50,000,001 - \$ \$100,000,001	\$50 million \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
ar	7: Sign Below						
or	you	I have exam	ned this petition, and I de	clare under penalty of perjur	ry that the info	ormation provided is true and correct.	
						gible, under Chapter 7, 11,12, or 13 of title 11, Uni e to proceed under Chapter 7.	tec
				not pay or agree to pay somuired by 11 U.S.C. § 342(b)		not an attorney to help me fill out this document, I	
		I request rel	ief in accordance with the	e chapter of title 11, United	States Code,	, specified in this petition.	
		case can re				y or property by fraud in connection with a bankruptoboth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	су
		MOHAMN Signature of	IAD B MIAH Debtor 1		Signature of D	Debtor 2	
		Executed or	May 2, 2019 MM / DD / YYYY		Executed on	MM / DD / YYYY	

Debtor 1	MIAH, MOHAMMAD	В		 Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ralph Kaczmarczyk	Date	May 2, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Ralph Kaczmarczyk			
Printed name			
Ralph D. Kaczmarczyk			
Firm name			
24725 W 12 Mile Rd Ste 110			
Southfield, MI 48034-8345			
Number, Street, City, State & ZIP Code			
Contact phone	Email address	kzlaw@aol.com	
P29637			
Bar number & State			

Fill in th	is information to identify y	our case and thi	s filing:		
Debtor 1	MOHAMMAD B MIA	Н			
	First Name	Middle Name	Last Name	}	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the: EA	STERN DISTRI	CT OF MICHIGAN, DETROIT DIVISION		
Case number					☐ Check if this is an
- Cuse Humber					amended filing
Official Fo	orm 106A/B				
Schedul	le A/B: Prope	rty			12/15
think it fits best. E information. If mor Answer every ques	de as complete and accurate as re space is needed, attach a se stion. Each Residence, Building, La	s possible. If two r parate sheet to th nd, or Other Real	only once. If an asset fits in more than one of narried people are filing together, both are eas form. On the top of any additional pages, Estate You Own or Have an Interest In nce, building, land, or similar property?	qually responsible for su	pplying correct
☐ No. Go to Pa	rt 2.				
Yes. Where	is the property?				
2538 Don Street address	na Ave , if available, or other description	What ■	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Creditors Who Have Cla	ed claims on Schedule D: ims Secured by Property.
Warren	MI 48091-	3946 □	Land	Current value of the entire property?	Current value of the portion you own?
City	State ZIP C	=	Investment property	\$120,880.00	\$880.00
			Timeshare Other	(such as fee simple, ter	your ownership interest nancy by the entireties, or
		_	nas an interest in the property? Check one Debtor 1 only	a life estate), if known. Tenancy by the E	ntirety
MACOME	3		Debtor 2 only	Tonancy by the L	
County			Debtor 1 and Debtor 2 only	☐ Check if this is cor	mmunity property
			At least one of the debtors and another	(see instructions)	minumity property
			information you wish to add about this iten rty identification number:	ı, such as local	
		F F			
			our entries from Part 1, including any e		\$880.00
Part 2: Describe	Your Vehicles				
			vehicles, whether they are registered edule G: Executory Contracts and Unexpi		icles you own that
3. Cars, vans, tr	ucks, tractors, sport utility	vehicles, motor	cycles		
■ No					
■ No					

D	ebtor 1 MIAH, MO	DHAMMAD B	Case number (if known)	
		notor homes, ATVs and other recreational vehing, motors, personal watercraft, fishing vessels, sn		
	■ No			
	☐ Yes			
5		of the portion you own for all of your entries for Part 2. Write that number here		\$0.00
Pa	art 3: Describe Your Per	rsonal and Household Items		
D	o you own or have an	y legal or equitable interest in any of the follow	ving items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and Examples: Major application No	d furnishings ances, furniture, linens, china, kitchenware		
	Yes. Describe	HOUSEHOLD GOODS		\$4,000.00
7.	including o	s and radios; audio, video, stereo, and digital equipocell phones, cameras, media players, games	nent; computers, printers, scanners; music collec	tions; electronic devices
	■ No □ Yes. Describe			
8.		nd figurines; paintings, prints, or other artwork; boos, memorabilia, collectibles	ks, pictures, or other art objects; stamp, coin, or b	paseball card collections; other
	Yes. Describe			
9.	Equipment for sports Examples: Sports, pho instrument No Yes. Describe	otographic, exercise, and other hobby equipment; b	icycles, pool tables, golf clubs, skis; canoes and l	kayaks; carpentry tools; musical
10.	. Firearms	fles, shotguns, ammunition, and related equipme	nt .	
	■ No □ Yes. Describe	, aga.a, aa, aaa		
11.	. Clothes Examples: Everyday □ No	clothes, furs, leather coats, designer wear, shoes,	accessories	
	Yes. Describe	CLOTHES		\$500.00
12.	. Jewelry Examples: Everyday	jewelry, costume jewelry, engagement rings, wedd	ing rings, heirloom jewelry, watches, gems, gold,	silver
	■ No □ Yes. Describe			
13.	. Non-farm animals Examples: Dogs, cate	s, birds, horses		
	☐ Yes. Describe			
14.	. Any other personal a	and household items you did not already list, i	ncluding any health aids you did not list	

De	btor 1	MIAH, MOH	AMMAD	В		Case number (if known)	
	☐ Yes.	Give specific infe	ormation				
15.				our entries from Part 3,		for pages you have attached for	\$4,500.00
		scribe Your Finan					
Do	you ow	vn or have any l	egal or eq	uitable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No		•	wallet, in your home, in a	·	on hand when you file your petition	
				other financial accounts; ce multiple accounts with		nares in credit unions, brokerage hous each.	es, and other similar
	_				Institution name:		
			17.1.	Checking Account	CHASE BANK		\$500.00
	Examp ■ No	, mutual funds, onles: Bond funds,	investmen	r traded stocks t accounts with brokerage nstitution or issuer name	•	ccounts	
	-	ublicly traded st renture	ock and ir	terests in incorporated	and unincorporated b	ousinesses, including an interest in	n an LLC, partnership, and
		Give specific inf		bout theme of entity:		% of ownership:	
	Negoti Non-ne ■ No	iable instruments egotiable instrum	include pe ents are th	Is and other negotiable rsonal checks, cashiers' cose you cannot transfer to	hecks, promissory note:	s, and money orders.	
	⊔ Yes.	Give specific info		out them er name:			
		ment or pension oles: Interests in			thrift savings accounts	s, or other pension or profit-sharing p	lans
	☐ Yes.	List each accoun		y. f account:	Institution name:		
	Your sl		d deposits	you have made so that yo		or use from a company ter), telecommunications companies,	or others
					Institution name or inc	dividual:	
	Annuiti ■ No	ies (A contract fo	or a periodio	payment of money to you	u, either for life or for a n	number of years)	
	☐ Yes			e and description.			
		ts in an education C. §§ 530(b)(1), §			d ABLE program, or u	nder a qualified state tuition progr	am.
	■ No □ Yes	lr	nstitution na	ame and description. Sepa	arately file the records of	f any interests.11 U.S.C. § 521(c):	

D	ebtor 1	MIAH, MOHAMMAD B	Case number (if known)	
25.	. Trusts,	equitable or future interests in property (other than anything	listed in line 1), and rights or powers exercisal	ole for your benefit
	■ No			
	☐ Yes.	Give specific information about them		
26.	. Patents	s, copyrights, trademarks, trade secrets, and other intellectua	property	
	Examp	ples: Internet domain names, websites, proceeds from royalties and		
	■ No			
	☐ Yes.	Give specific information about them		
27	Licens	es, franchises, and other general intangibles		
		es: Building permits, exclusive licenses, cooperative association h	oldings, liquor licenses, professional licenses	
	■ No			
	☐ Yes.	Give specific information about them		
М	onev or	property owed to you?		Current value of the
	J, J.	, , , , , , , , , , , , , , , , , , , ,		portion you own?
				Do not deduct secured
				claims or exemptions.
28.		unds owed to you		
	■ No			
	☐ Yes.	Give specific information about them, including whether you already	filed the returns and the tax years	
29.	. Family	support		
	Examp	oles: Past due or lump sum alimony, spousal support, child suppo	rt, maintenance, divorce settlement, property settle	ement
	■ No			
	☐ Yes.	Give specific information		
30.		mounts someone owes you		
	Examp	oles: Unpaid wages, disability insurance payments, disability benefit unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compensation,	Social Security benefits;
	■ No	dispaid loans you made to someone else		
	_	Give specific information		
31.		ts in insurance policies bles: Health, disability, or life insurance; health savings account (HS	A): credit homeowner's or renter's insurance	
	■ No	wes. Health, disability, of the insurance, health savings account (the	7), creat, nomeowners, or renters insurance	
	_	Name the insurance company of each policy and list its value.		
		Company name:	Beneficiary:	Surrender or refund
				value:
32.	. Any int	erest in property that is due you from someone who has died		
	•	are the beneficiary of a living trust, expect proceeds from a life insur	ance policy, or are currently entitled to receive prope	erty because someone has
	died. ■ No			
	_	Give specific information		
	— 103.	Give specific information		
33	Claims	against third parties, whether or not you have filed a lawsuit	or made a demand for payment	
00.		oles: Accidents, employment disputes, insurance claims, or rights		
	■ No			
	☐ Yes.	Describe each claim		
3/1	Other (contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to set o	ff claims
J-7.	. Other t	oranigon and anniquidated etailis of every flature, including	Sound of the double and rights to set o	vidiiiio
	_	Describe each claim		
35.	_ `	ancial assets you did not already list		
	■ No	Give specific information		

Debt	or 1 MIAH, MOHAMMAD B		Case number (if known)	
	Add the dollar value of all of your entries from Part 4, including a Part 4. Write that number here	any entries for page	s you have attached for	\$500.00
Part 8	5: Describe Any Business-Related Property You Own or Have an Interes	st In. List any real esta	te in Part 1.	
37. D o	o you own or have any legal or equitable interest in any business-related	property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	6: Describe Any Farm- and Commercial Fishing-Related Property You O If you own or have an interest in farmland, list it in Part 1.	own or Have an Interes	t In.	
16. D	o you own or have any legal or equitable interest in any farm- or	commercial fishing	-related property?	
ı	No. Go to Part 7.			
[Yes. Go to line 47.			
Part 7	7: Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership No I Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$880.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$4,500.00		
58.	Part 4: Total financial assets, line 36	\$500.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$5,000.00	Copy personal property total	\$5,000.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$5,880.00

	Fill in this	s information to identify	vour case:			I
Do	ebtor 1					
De	EDIOI I	First Name	Middle Name	L	ast Name	}
-	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF MI	CHIG	AN, DETROIT DIVISION	
	ise number					☐ Check if this is an amended filing
	fficial For		perty You Cla	im	as Exempt	4/19
propout know For spe app	perty you listed of and attach to the wn). each item of perific dollar amplicable statuto	on Schedule A/B: Proper is page as many copies of property you claim as exempt. Alternately limit. Some exemption	ty (Official Form 106A/B) as you feet as not part 2: Additional Page as not part 2: Additional Page as not part 2: Additional Page as not part 3: Additional Page as not part 3: Additional Page 3: Additio	ur sou cessa amou II fair h aids	urce, list the property that you claim a ary. On the top of any additional pages unt of the exemption you claim. Of market value of the property bein s, rights to receive certain benefits	g exempted up to the amount of any
to a app	a particular dol blicable statuto	lar amount and the valu	ue of the property is determin		o exceed that amount, your exemp	
1.			iming? Check one only, even	if vou	r spouse is filing with you.	
	_		onbankruptcy exemptions. 11 l	•	, ,	
	_	iming federal exemptions.	. , .		3 (-)(-)	
2.		,	le A/B that you claim as exer	npt, f	ill in the information below.	
		on of the property and line hat lists this property	on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Seriedale 742 C	mat note time property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	2538 Donna	α Δνε	\$880.00		\$440.00	11 USC § 522(d)(1)
	Warren MI, County: MA	48091-3946 ACOMB			100% of fair market value, up to any applicable statutory limit	
	HOUSEHOL Line from Sch		\$4,000.00		\$4,000.00	11 USC § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	CLOTHES	edule A/B: 11.1	\$500.00		\$500.00	11 USC § 522(d)(5)
	LINE HOIH SCH	Caule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
	CHASE BAI	NK	\$500.00		\$500.00	11 USC § 522(d)(5)

Official Form 106C

Schedule C: The Property You Claim as Exempt

Line from Schedule A/B: 17.1

100% of fair market value, up to any applicable statutory limit

3.		laiming a homestead exemption of more than \$170,350? adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.
	No	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this i	information to ident	ify your case:				
Debtor 1						
Debior	MOHAMMAD B First Name	Middle Name Last Name		}		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last Name				
United States Bank	ruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN, DET	ROIT DIVISION			
Case number						
(if known)				☐ Check	if this is an	
				amend	ed filing	
O#: -: -! =	400D					
Official Form						
Schedule D): Creditors	Who Have Claims Secure	ed by Property	У	12/15	
		two married people are filing together, both are ed				
needed, copy the Ado known).	litional Page, fill it out	, number the entries, and attach it to this form. On	the top of any additional p	pages, write your name	and case number (if	
•	ave claims secured by	your property?				
☐ No. Check th	ris box and submit thi	s form to the court with your other schedules. You	u have nothing else to rep	oort on this form.		
_	I of the information be	•	3 ,			
		now.				
•	Secured Claims	pere than one acquired aloim list the graditar apparetal	., Column A	Column B	Column C	
		nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured	
much as possible, list	the claims in alphabetic	al order according to the creditor 's name.	Do not deduct the value of collateral.	that supports this claim	portion If any	
2.1 Bmw Finan	cial Services	Describe the property that secures the claim:	\$21,676.00	\$0.00	\$21,676.00	
Creditor's Name				·		
FF4F Doubo	amtar Cir	As of the date you file, the claim is: Check all that				
5515 Parkc	43017-3584	apply. Contingent				
	ity, State & Zip Code	☐ Unliquidated				
	my, state a 2.p sode	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgage or se	ecured			
Debtor 2 only		car loan)				
Debtor 1 and Debt		Statutory lien (such as tax lien, mechanic's lien)				
At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clair community debt		Other (including a right to offset)				
•						
Date debt was incurr	red <u>2018-04</u>	Last 4 digits of account number 4017	·			
2.2 New Res-S	hallpaint Mta	Describe the property that secures the claim:	\$120 440 00	\$120 000 0 0	\$0.00	
Creditor's Name	hellpoint Mtg	2538 Donna Ave, Warren, MI	<u>\$120,440.00</u>	\$120,880.00	<u> </u>	
		48091-3946				
55 Beattie I	PI	As of the date you file, the claim is: Check all that				
Greenville,		apply.				
29601-2165		Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	-	☐ An agreement you made (such as mortgage or se	ecured			
Debtor 2 only		car loan)				
☐ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this claim		Other (including a right to offset)				
community debt						
Date debt was incurr	ate debt was incurred 2017-12 Last 4 digits of account number 2653					

Official Form 106D

Debtor 1 MOHAMMAD B MIAH Case number (f known)

First Name Middle Name Last Name

Add the dollar value of your entries in Column A on this page. Write that number here: \$142,116.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$142,116.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in	this information to identify yo	ır case:	
Debtor 1	MOHAMMAD B I	NIAH	
	First Name	Middle Name Last Name	
Debtor 2 (Spouse if,	filing) First Name	Middle Name Last Name	
	0,		
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT OF MICHIGAN, DETROIT DIVISION	
Case nui	mber		
(if known)			☐ Check if this is an
			amended filing
Officia	I Form 106E/F		
		ho Have Unsecured Claims	12/15
		e Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPI	
D: Credito the Contin	rs Who Have Claims Secured by P	ired Leases (Official Form 106G). Do not include any creditors with partially sec operty. If more space is needed, copy the Part you need, fill it out, number the ve no information to report in a Part, do not file that Part. On the top of any add secured Claims	entries in the boxes on the left. Attach
1. Do ar	ny creditors have priority unsecure	d claims against you?	
■ No	o. Go to Part 2.		
□Y€	es.		
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
3. Do ar	ny creditors have nonpriority unse	cured claims against you?	
□ No	o. You have nothing to report in this p	art. Submit this form to the court with your other schedules.	
■ Ye	ne.		
unsec	cured claim, list the creditor separatel	aims in the alphabetical order of the creditor who holds each claim. If a creditor / for each claim. For each claim listed, identify what type of claim it is. Do not list clair st the other creditors in Part 3.If you have more than three nonpriority unsecured clai	ns already included in Part 1. If more
			Total claim
4.1	ADELSON EYE	Last 4 digits of account number	\$125.00
	Nonpriority Creditor's Name		
	11620 6 Mile Rd Ste 102	When was the debt incurred?	
	Northville, MI 48168-8528		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
1	Who incurred the debt? Check one.		
ı	Debtor 1 only	☐ Contingent	
[Debtor 2 only	☐ Unliquidated	
[Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and an	П	
	Check if this claim is for a com		
	lebt s the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that report as priority claims 	t you did not
_	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other Specify	

A 14 4 7 6 11 6 1	DEDIT	Lord A. B. Monday, and a second secon				
AMAZON CI Nonpriority Cred		Last 4 digits of account number	\$175.00			
		When was the debt incurred?				
PO Box 151						
	, DE 19850-5123 City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred th	he debt? Check one.					
Debtor 1 only	/	☐ Contingent				
Debtor 2 only	/	☐ Unliquidated				
Debtor 1 and	Debtor 2 only	☐ Disputed				
☐ At least one	of the debtors and another	Type of NONPRIORITY unsecured claim:				
	s claim is for a community	Student loans				
debt Is the claim sub	eject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No		Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes		Other. Specify				
AMERICAN	RECOVERY	Last 4 digits of account number	\$300.0			
Nonpriority Cred	itor's Name	When was the debt incurred?				
34505 W 12	Mile Rd Ste 333	when was the dept incurred?				
Farmington	Hills. MI 48331-3288					
Number Street C	City State Zip Code	As of the date you file, the claim is: Check all that apply				
_	he debt? Check one.					
■ Debtor 1 only	/	☐ Contingent				
Debtor 2 only	/	☐ Unliquidated				
Debtor 1 and	Debtor 2 only	☐ Disputed				
☐ At least one	of the debtors and another	Type of NONPRIORITY unsecured claim:				
	s claim is for a community	Student loans				
debt Is the claim sub	piect to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes		Other. Specify				
Amex/Dsnb		Last 4 digits of account number 7372	\$4.434.0			
Nonpriority Cred			ψ 1, 10 He			
PO Box 821	0	When was the debt incurred? 2017-04				
Mason, OH						
	City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the	he debt? Check one.					
■ Debtor 1 only	/	☐ Contingent				
Debtor 2 only	/	☐ Unliquidated				
Debtor 1 and	Debtor 2 only	☐ Disputed				
☐ At least one	of the debtors and another	Type of NONPRIORITY unsecured claim:				
	s claim is for a community	☐ Student loans				
debt	pinet to offent?	Obligations arising out of a separation agreement or divorce that you did not				
Is the claim sub	oject to onset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
■ No		_				
☐ Yes		Other. Specify				

MIAH, MOHAMMAD B		Case number (f known)	
Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	1349	\$2,523.00
Nonphonty Greator's Name	When was the debt incurred?	2016-11	
PO Box 15369 Wilmington, DE 19850-5369 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that annly	
Who incurred the debt? Check one.	no or the date you me, the claim	o. Chook an inat apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Citi	Last 4 digits of account number	1853	\$7,966.00
Nonpriority Creditor's Name	When was the debt incurred?	2013-06-12	
PO Box 6241 Sioux Falls, SD 57117-6241	when was the dest incurred:	2013-00-12	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify		
Comenitybank/wayfair	Last 4 digits of account number	9114	\$1,088.00
Nonpriority Creditor's Name	When was the debt incurred?	2018-01	
PO Box 182789 Columbus, OH 43218-2789	Wildin Was the asset mounted.	2010-01	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	d alaim.	
At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	u Giaiifi:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	on plans, and other similar debts	
■ No □ Yes	<u> </u>	g p.so, and other official dobto	
⊔ YeS	Other. Specify		

Debtor	1 MIAH, MOHAMMAD B		Case number (f known)			
.8	Comenitycb/gardnerwht Nonpriority Creditor's Name	Last 4 digits of account number		\$2,746.00		
	PO Box 182120 Columbus, OH 43218-2120 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim				
	Who incurred the debt? Check one.	•				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
.9	DIRECT TV	Last 4 digits of account number		\$450.00		
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 6550 Greenwood Village, CO 80155-6550					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify				
10	Kohls/capone	Last 4 digits of account number	9116	\$530.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2013-10			
	N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051		2010 10			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans	u Julii.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes					

	Case number (f kn	
KRISLEE FINANCIAL CORPORATION	Last 4 digits of account number	\$81,000.00
Nonpriority Creditor's Name	When was the debt incurred?	
2928 Bloomfield Park Dr West Bloomfield, MI 48323-3506		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that app	ply
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or report as priority claims	•
No	Debts to pension or profit-sharing plans, and other si	milar debts
Yes	Other. Specify	
Macys/dsnb	Last 4 digits of account number 4078	\$1,535.00
Nonpriority Creditor's Name	When was the debt incurred? 2007-10	
PO Box 8218	when was the dept incurred:	
Mason, OH 45040-8218 Number Street City State Zip Code	. As of the date you file, the claim is: Check all that app	ply
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other si	milar debts
Yes	Other. Specify	
MICH INSTIT UROLOGY	Last 4 digits of account number	\$300.00
Nonpriority Creditor's Name	When was the debt incurred?	
20952 E 12 Mile Rd Ste 200 Saint Clair Shores, MI 48081-3203		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that app	ply
140 - 1 141 - 141 (0.0)		
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
_	☐ Contingent ☐ Unliquidated	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or	divorce that you did not
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	

Official Form 106 E/F

OAKLAND DOAGNOOTICO	Lock A digito of account number	# F00 0
OAKLAND DOAGNOSTICS Nonpriority Creditor's Name	Last 4 digits of account number	\$500.0
	When was the debt incurred?	
29992 Northwestern Hwy Ste C Farmington Hills, MI 48334-3292	_	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
SAFETY LAWN CARE	Last 4 digits of account number	\$300.00
Nonpriority Creditor's Name	When was the debt incurred?	
35450 Mound Rd	when was the debt incurred:	
Sterling Heights, MI 48310-4721 Number Street City State Zip Code		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Continues	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
St John Hospital Nonpriority Creditor's Name	Last 4 digits of account number 5013	\$467.00
Nonpriority Orealies 3 Name	When was the debt incurred? 2015-10	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	

Debtor 1	MIAH, MO	DHAMMAD B		Case r	number (if known)				
	St John Oa Nonpriority Cred	kland Hosp	Last 4 digits of account number	028	6		\$902.00		
	Nonpriority Cred	alloi 5 Name	When was the debt incurred?	201	7-09				
		City State Zip Code	As of the date you file, the claim	n is: Chec	k all that apply				
	■ Debtor 1 onl		☐ Contingent						
	Debtor 2 onl	•	☐ Unliquidated						
	Debtor 1 and	•	☐ Disputed						
		of the debtors and another	Type of NONPRIORITY unsecur	ed claim:	:				
	_	s claim is for a community	Student loans						
	debt	bject to offset?	☐ Obligations arising out of a sepreport as priority claims	paration a	greement or divorce	that you did not			
	■ No	.,	Debts to pension or profit-shar	ing plans	, and other similar de	ebts			
	☐ Yes		Other. Specify						
	Tbom/Atls/		Last 4 digits of account number	578	4		\$1,022.00		
	Nonpriority Cred	ditor's Name	When was the debt incurred?	201	8-10				
	PO Box 105 Atlanta, GA	30348-5555	_						
		City State Zip Code: the debt? Check one.	As of the date you file, the clain	is: Chec	k all that apply				
	■ Debtor 1 onl		Continuent						
	Debtor 2 onl	•	☐ Contingent ☐ Unliquidated						
	Debtor 1 and	•	Disputed						
	_	of the debtors and another	Type of NONPRIORITY unsecur	ed claim:	:				
		s claim is for a community	Student loans						
	debt		☐ Obligations arising out of a separation agreement or divorce that you did not						
	No	bject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts						
	■ No Yes								
	- 103		Other. Specify						
Part 3:	List Others	s to Be Notified About a Deb	t That You Already Listed						
is tryin have m notified Name and Accoun	g to collect fro nore than one c d for any debts d Address nt Services	m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o	On which entry in Part 1 or Part 2 did you Line 4.17 of (Check one):	n Parts 1 litional control u list the Part 1	or 2, then list the creditors here. If you original creditor?	collection agency here. u do not have additiona rity Unsecured Claims	Similarly, if you I persons to be		
	E Loop 410 ntonio, TX 7			Part 2	Creditors with None	priority Unsecured Claims	S		
	,		Last 4 digits of account number	C)286				
	d Address nt Services	Colls	On which entry in Part 1 or Part 2 did you Line 4.16 of (Check one):		•	rity Unsecured Claims			
	E Loop 410			Part 2	Creditors with Non	priority Unsecured Claims	S		
San Ar	ntonio, TX 7	8217-5221	Last 4 digits of account number	5	5013				
Part 4:	Add the An	nounts for Each Type of Ur	secured Claim						
6. Total th		certain types of unsecured cla	ims. This information is for statistical	reporting	j purposes only. 28	8 U.S.C. §159. Add the a	imounts for each		
					Total	l Claim			
Total cla	6a.	Domestic support obligation	3	6a.	\$	0.00			
from Pa		Taxes and certain other debt	•	6b.	\$	0.00			
	6c.	•	injury while you were intoxicated	6c.	\$	0.00			
	6d.	Other. Add all other priority un	secured claims. Write that amount here.	6d.	\$	0.00			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 MIAH, MOHAMMAD B

Case number (if known)

6-	Tatal	Delasias	۸ ماما	1:	6-	46 20	64
6e.	iotai	Priority.	. Auu	IIIIes	Оa	unougn	ou.

Total	claims
from	Part 2

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts 6g.
- 6h.
- Other. Add all other nonpriority unsecured claims. Write that amount 6i.
- Total Nonpriority. Add lines 6f through 6i.

6e.	\$	0.00
	l	

	Total Claim
f.	\$ 0.00
g.	\$ 0.00
h.	\$ 0.00
i.	\$ 106,363.00

information to identif	y your case:			
MOHAMMAD B N	ЛІАН			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
cruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN, DETROIT DIVISION		
				Check if this is an amended filing
	MOHAMMAD B N First Name	First Name Middle Name	MOHAMMAD B MIAH First Name Middle Name Last Name First Name Middle Name Last Name	MOHAMMAD B MIAH First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	Oity		Olale	ZII COUE	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

	in this information to identif	y your case.			
Debtor 1	MOHAMMAD B N	Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	First Name	Middle Name	Last Name	_	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN, DETROI	T DIVISION	
Case numbe	er				
(if known)					☐ Check if this is an amended filing
	Form 106H ule H: Your Code	ebtors			12/15
 Do yo No Yes 	ou have any codebtors? (If y	<i>r</i> ou are filing a joint case, d	o not list either spouse as	s a codebtor.	
Californ —	ia, Idaho, Louisiana, Nevada,				states and territories include Arizona
_	Go to line 3. Did your spouse, former spous	se, or legal equivalent live v	vith you at the time?		
line 2 a	gain as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the cre	vith you. List the person shown ir editor on Schedule D (Official For e E/F, or Schedule G to fill out
_	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				D Schedule D, line	·
N	ame			☐ Schedule E/F, lir	
				☐ Schedule G, line	
	lumber Street ity	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	lame			☐ Schedule E/F, lir	
				☐ Schedule G, line	
N	lumber Street			_	
_	ity	State	ZIP Code		

	in this information to	: -1 4: 6									
	in this information to btor 1	, ,									
Dei	DIOI 1	MOHAMMAI) B WIAH			-					
	btor 2 buse, if filing)					-					
Uni	ited States Bankrupt	cy Court for the:	EASTERN DISTRICT DIVISION	OF MICHIGAN,	DETROIT	_					
(lf kr	se number	1001						ended ended	showing	postpetition o	chapter 13
	fficial Form						MM / E	DD/ YY	YY		
S	chedule I: `	Your Inco	ome								12/15
spo atta Pa	use. If you are separate shee	arated and your t to this form. O Employment	re married and not filin spouse is not filing wit n the top of any additio	h you, do not inc	lude informa	ation	about your s	pouse	. If more	space is ne	eded,
1.	Fill in your emplo information.	byment		Debtor 1			Deb	tor 2 o	r non-fili	ing spouse	
	If you have more the attach a separate proformation about employers.	page with	Employment status	☐ Employed ☐ Not employ	ed		_	Employo Not emp			
	Include part-time, self-employed wor		Occupation Employer's name								
	Occupation may in homemaker, if it a		. Employer's address								
			How long employed th	nere?							
Pai	rt 2: Give Det	ails About Mon	thly Income								
unle	ess you are separated	d.	te you file this form. If y	· ·						•	
	ou or your non-filing s ce, attach a separate		e than one employer, comb n.	oine the informatio	n for all emplo	oyers	for that perso	n on the	e lines be	elow. If you ne	ed more
							For Debtor 1			otor 2 or ng spouse	
2.			, and commissions (be alculate what the monthly w		2.	\$_	0.	00	\$	0.00	
3.	Estimate and list	monthly overti	ne pay.		3.	+\$_	0.	00	+\$	0.00	
4.	Calculate gross I	ncome. Add line	e 2 + line 3.		4.	\$_	0.00)	\$	0.00	

				For	Debtor 1		ebtor 2 or ling spouse	
	Сору	line 4 here	4.	\$	0.00	\$	0.00	
F	l int m	Il neverall deductions.						
5.		all payroll deductions:	_	•		•		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	0.00	
	5e.	Insurance	5e.	\$_	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	0.00	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	0.00	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	0.00	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$_	1,426.00	\$	360.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: FOOD STAMPS SOCIAL SECURITY SON	8f.	- \$_	131.00	\$ *	0.00	
	8g.	Pension or retirement income	— 8g.	<u>*</u> –	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$-		+ \$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,557.00	\$	720.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$		1,557.00 + \$	72	0.00 = \$	2,277.00
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Includ other	all other regular contributions to the expenses that you list in Schedule and de contributions from an unmarried partner, members of your household, your defriends or relatives. It include any amounts already included in lines 2-10 or amounts that are not available:	ependent	, ,	,		∍ <i>J</i> . 11. + \$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					Combine	
13.	Do yo	ou expect an increase or decrease within the year after you file this form?	?				monthly	income
		No.						
		Yes. Explain:						

Fill in	n this informa	ation to identify you	ur case:					
Debte	or 1	МОНАММАГ	B MIAH	ł		Chec	k if this is:	
Debte	or 2					=	An amended filing A supplement show	ing postpetition chapter 13
(Spo	use, if filing)					- '	expenses as of the	following date:
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICH DIVISION					AN, DETROIT		MM / DD / YYYY	
Case (If kn	e number nown)							
		orm 106J						
		J: Your E	-	ISES If two married people are	filing together, bot	h are equally	responsible for s	12/15
info	rmation. If m	ore space is nee er every questio	ded, attac	ch another sheet to this fo	orm. On the top of a	any addition	al pages, write you	ir name and case number
Part	<u> </u>	ribe Your Housel						
1.								
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?							
	□ N □ Y		t file Offici	al Form 106J-2, <i>Expenses f</i>	or Separate Housel	holdof Debtor	2.	
2.	Do you hav	ou have dependents?						
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state				_		40	□ No
	dependents	names.			Son		13	■ Yes □ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do your exp	oenses include	_	No	-			□ 163
		f people other th d your dependen	an $_{f \Box}$	Yes				
Part		nate Your Ongoin						
expe				ptcy filing date unless yo is filed. If this is a supple				
				overnment assistance if y				
value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)						Your expenses		
4.		or home ownersh and any rent for the		ses for your residence. Ind	clude first mortgage	4. \$		974.00
If not included in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00
		erty, homeowner's,				4b. \$		0.00
		maintenance, rep				4c. \$		100.00
5.		owner's association		ominium dues ur residence, such as hom	ie equity loans	4d. \$ 5. \$	-	0.00
						σ. ψ		<u> </u>

Official Form 106J Schedule J: Your Expenses
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Official Form 106J Schedule J: Your Expenses page 2

Fill	in this information to identify y	our case:			
Debtor 1					
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN, DETROIT DIV	VISION	
Case nu (if known)	mber				☐ Check if this is an amended filing
	al Form 106Dec	an Individua	l Dobtorio Sok	a dula a	
	aration About		Debtor 3 Cor	icadics	12/15
	g money or property by fraud in both. 18 U.S.C. §§ 152, 1341, and Sign Below		ruptoy case carries at min	ies up to \$250,000, v	or impresonment for up to 20
Dic	I you pay or agree to pay some	eone who is NOT an attor	ney to help you fill out bank	ruptcy forms?	
	No				
	Yes. Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	ler penalty of perjury, I declare they are true and correct.	that I have read the sum	mary and schedules filed wi	ith this declaration a	and
Х	/s/ MOHAMMAD B MIAH		X		
	MOHAMMAD B MIAH Signature of Debtor 1		Signature of De	ebtor 2	
	Date May 2, 2019		Date		

Fill in t	his information to identif	fy your case:				
Debtor 1	MOHAMMAD B N			\		
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN, DETROIT DIVISION			
Case number (if known)					☐ Check if amende	this is an d filing
Be as complete information. Fill	and accurate as possible out all of your schedule	e. If two married people as first; then complete the	nd Certain Statistical Info are filing together, both are equally re e information on this form. If you are the box at the top of this page.	esponsible for s	upplying co	
Part 1: Sumr	marize Your Assets					
					Your ass	ets
						hat you own
	A/B: Property (Official Foi ine 55, Total real estate, fro				\$	
1a. Copy li	ine 55, Total real estate, fro	rom Schedule A/B				hat you own
1a. Copy lii 1b. Copy lii	ine 55, Total real estate, from the 62, Total personal prop	rom Schedule A/B			\$	880.00 5,000.00
1a. Copy li 1b. Copy li 1c. Copy lii	ine 55, Total real estate, from the 62, Total personal prop	rom Schedule A/B			\$	hat you own

Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 142,116.00 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D...

Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F......

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F...... 106,363.00

Your total liabilities 248,479.00

Part 3: Summarize Your Income and Expenses

Schedule I: Your Income(Official Form 106I) 2,277.00 Copy your combined monthly income from line 12 oSchedule I.....

Schedule J: Your Expenses (Official Form 106J) 3,699.00 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7 What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$	0.00
	_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$)0
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.0)0
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.0	<u>)0</u>
9d. Student loans. (Copy line 6f.)	\$)0
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$)0
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.0	<u>)0</u>
9g. Total. Add lines 9a through 9f.	\$0.00	-

		Fill in this	information to identi	fy your case:			
De	btor	1	MOHAMMAD B				
_	h. 4 = u. 1	0	First Name	Middle Name	Last Name	}	
	btor 2 ouse if	Z f, filing)	First Name	Middle Name	Last Name		
Un	ited S	States Ban	kruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN, DETROIT DIV	/ISION	
		umber				_	2.
(If K	nown)						Check if this is an amended filing
St Be a	ate	ement omplete an	d accurate as possib		e filing together, both are	Bankruptcy equally responsible for supp v additional pages, write your	
_	now	_	r every question.	rital Status and Where You	Lived Refore		
		•			Lived before		
1.	wn	at is your	current marital statu	S?			
		Married Not marr	ied				
2.	Dur	ring the las	st 3 years, have you	lived anywhere other than t	where you live now?		
		No Yes. List	all of the places you liv	ved in the last 3 years. Do not	include where you live now.		
	De	ebtor 1 Prio	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior A	address:	Dates Debtor 2 lived there
3. stat						nity property state or territory tico, Texas, Washington and W	
		No					
		Yes. Mak	e sure you fill out Scho	edule H: Your Codebtors (Off	cial Form 106H).		
Pa	rt 2	Explain	the Sources of You	r Income			
4.	Fill	in the total	amount of income yo	nployment or from operatin u received from all jobs and a lave income that you receive to	all businesses, including par		ndar years?
		No					
		Yes. Fill i	n the details.				
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

5.	Include incother publ	come regard ic benefit pa	less of wheth yments; pens	ions; rental income; interest; d	o previous calendar years? nples of other income are alimividends; money collected fron ogether, list it only once under	n lawsuits; royalties;		
	List each	source and t	he gross inco	me from each source separate	ely. Do not include income that	you listed in line 4.		
	□ No							
		Fill in the de	etails.					
			, , , , , , , , , , , , , , , , , , ,					
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	last calen nuary 1 to	dar year: December	31, 2018)	SOCIAL SECURITY DISABILITY	\$17,112.00			
		dar year be December		SOCIAL SECURITY DISABILITY	\$17,112.00			
Par	t 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are eithe	Neither D	ebtor 1 nor D		umer debts. Consumer debts	are defined in 11 U	.S.C. § 101(8	3) as "incurred by an
		individual p	orimarily for a	personal, family, or household	I purpose."			
		During the No.	-		d you pay any creditor a total of	\$6,825* or more?		
		☐ No.	Go to line		d a total of \$6,825* or more in	one or more paymer	nts and the to	ntal amount you paid that
			creditor. Depayments to	o not include payments for do o an attorney for this bankrupt	mestic support obligations, su cy case.	uch as child suppor	t and alimon	
		•	•	, ,	after that for cases filed on or	arter the date or adj	usimeni.	
	■ Yes.			or both have primarily consure you filed for bankruptcy, did	umer debts. If you pay any creditor a total of	\$600 or more?		
		■ No.	Go to line	7.				
		☐ Yes		or domestic support obligation	d a total of \$600 or more and the such as child support and a			
	Creditor	's Name and	d Address	Dates of payme		Amount you	Was this p	payment for
					paid	still owe		
	Insiders in which you	clude your re are an office	elatives; any g er, director, pe	general partners; relatives of ar erson in control, or owner of 20	a payment on a debt you over ny general partners; partnershi % or more of their voting secu- le payments for domestic supp	ps of which you are rities; and any mana	a general pa aging agent,	artner; corporations of including one for a
	■ No □ Yes.	List all paym	nents to an ins	sider.				
	Insider's	Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Reason fo	or this payment
3.	insider?	•		bankruptcy, did you make eed or cosigned by an insider.	any payments or transfer ar	ny property on acc	ount of a de	ebt that benefited an
	_	,	, <u>G</u>					
	■ No	Liet all nave	nents to an ins	eider.				
		Name and		Dates of payme	ent Total amount	Amount you	Reason fo	or this payment
	maidel 3	rume and	, .uui 633	Dates of payling	paid	still owe		editor's name

Case number (if known)

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Official Form 107

Debtor 1 MIAH, MOHAMMAD B

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1 MIAH, MOHAMMAD B			Case number (if known)						
or o	gambling?								
_	,g.								
_	No								
	Yes. Fill in the details.								
	scribe the property you lost and w the loss occurred		be any insurance coverage for the loss		Date of your loss	Value of property			
110	w the loss occurred		the amount that insurance has paid. List ice claims on line 33 of Schedule A/B: Pro		loss				
Part 7:	List Certain Payments or Transfer	's							
cor	sulted about seeking bankruptcy or	preparin	I you or anyone else acting on your be g a bankruptcy petition? or credit counseling agencies for services			y to anyone you			
	No								
	Yes. Fill in the details.								
Pe	rson Who Was Paid		Description and value of any propert	tv	Date payment or	Amount of			
Ad	Address		transferred	-,	transfer was	paymen			
	nail or website address rson Who Made the Payment, if Not \	You			made				
	ALPH KACZMARCZYK	ı ou				\$1,640.00			
						¥ 1,5 1111			
	No Yes. Fill in the details. rson Who Was Paid		Description and value of any propert	tv	Date payment or	Amount of			
	Idress		transferred	.y	transfer was made	payment			
trar Incl	nsferred in the ordinary course of you	ur busine s made as	security (such as the granting of a securi						
	rson Who Received Transfer Idress		Description and value of property transferred		any property or s received or debts	Date transfer was made			
Pe	rson's relationship to you			para iii oz	ionango				
Al	AMINA MIAH		WIFES NAME ADDED TO DEED FOR 2538 DONNA, WARREN MI BY			DECEMBER 2017			
W	IFE		MORTGAGE COMPANY TO REFINANCE						
ber	neficiary? (These are often called asset No		did you transfer any property to a self- n devices.)	settled tru	st or similar device o	f which you are a			
	Yes. Fill in the details.								
Na	me of trust		Description and value of the property	y transferr	ed	Date Transfer was			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Deb	tor 1	MIAH, MOHAMMAD B				Case numl	ber (if known)		
Par	8:	List of Certain Financial Accounts, Ins	struments, Safe De	eposit Boxes,	and Stora	age Units			
	sold, Includ house	in 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, assoc No	or other financial a	ccounts; cert	ificates of			, ,	
	Yes. Fill in the details.		Town of a country				D-1	Last balance batan	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)			Last 4 digits of account of account number instrument		unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer	
		ou now have, or did you have within 1 y , or other valuables?	year before you fil	ed for bankru	ptcy, any	safe depo	sit box or other deposit	ory for securities,	
	_	No							
		Yes. Fill in the details.	VAIII I I	1		D 'b (h	D ('11	
		ee of Financial Institution ress (Number, Street, City, State and ZIP Code)		ad access to umber, Street, Cit		Describe t	he contents	Do you still have it?	
22.	= ,	you stored property in a storage unit o No Yes. Fill in the details.	or place other than	n your home v	vithin 1 ye	ear before	you filed for bankruptc	y?	
	Nam	ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	to it?	as or had acc		Describe t	he contents	Do you still have it?	
Par	9-	Identify Property You Hold or Control	for Someone Flse	a					
23.	some	ou hold or control any property that so eone. No Yes. Fill in the details.	meone else owns	? Include any	property	you borro	wed from, are storing fo	or, or hold in trust for	
		res. Fill ill the details.	Where is th	ne property?		Describe t	he property	Value	
		ress (Number, Street, City, State and ZIP Code)		et, City, State and		Describe t	ine property	Value	
Par	10:	Give Details About Environmental Info	•						
For t	he pu	rpose of Part 10, the following definition	ons apply:						
	toxic	conmental law means any federal, state substances, wastes, or material into the colling the cleanup of these substances	ne air, land, soil, s	urface water,					
		neans any location, facility, or property operate, or utilize it, including disposa		any environ	mental lav	v, whether	you now own, operate,	or utilize it or used to	
		rdous material <mark>means anything an env</mark> rial, pollutant, contaminant, or similar t		fines as a haz	ardous w	aste, haza	rdous substance, toxic	substance, hazardous	
Repo	ort all	notices, releases, and proceedings that	at you know about	, regardless o	of when th	ey occurre	ed.		
24.	Has a	any governmental unit notified you that	t you may be liable	e or potential	y liable ui	nder or in	violation of an environn	nental law?	
		No							
	□ '	Yes. Fill in the details.							
		ne of site ress (Number, Street, City, State and ZIP Code)	Governme Address (N ZIP Code)	ntal unit umber, Street, Cit	y, State and	Enviro know i	nmental law, if you it	Date of notice	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Jebi	.01 1 <u> </u>	AH, MUHAMMAD B		Case number (if known)	
5. I	Have you	notified any governmental unit o	of any release of hazardous material?		
	■ No				
	_	Fill in the details.			
	Name of Address	Site (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
ا	Have you	been a party in any judicial or ad	Iministrative proceeding under any enviro	onmental law? Include settlements	and orders.
	.				
	■ No □ Yes.	Fill in the details.			
	Case Titl	e	Court or agency	Nature of the case	Status of the
	Case Nui	mber	Name Address (Number, Street, City, State and ZIP Code)		case
art	11: Giv	e Details About Your Business or	r Connections to Any Business		
·. ·	Within 4 v	rears before you filed for bankrur	otcy, did you own a business or have any	of the following connections to an	v business?
-	_ `		in a trade, profession, or other activity, e	_	,
			pany (LLC) or limited liability partnership	-	
		partner in a partnership	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
		n officer, director, or managing e	vacutive of a cornoration		
	_	, ,	ng or equity securities of a corporation		
	_				
	_	lone of the above applies. Go to			
		,,,,	ill in the details below for each business.		
	Business Address	s Name	Describe the nature of the business	Employer Identification num Do not include Social Securi	
	(Number, S	treet, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
2 1	Within 2 v	ears before you filed for bankrur	otcy, did you give a financial statement to	anyone about your business? Inc	lude all financial
		ns, creditors, or other parties.	otey, did you give a illiancial statement to	anyone about your business: mc	idde all Illiancial
	■ No				
	_	Fill in the details below.			
	Name		Date Issued		
	Address (Number, St	reet, City, State and ZIP Code)			
art	12: Sign	n Below			
ue a ank 3 U. s/ !	and correctuptcy ca S.C. §§ 15	ct. I understand that making a fal se can result in fines up to \$250,0 i2, 1341, 1519, and 3571. WAD B MIAH	nancial Affairs and any attachments, and se statement, concealing property, or obt 000, or imprisonment for up to 20 years, o	aining money or property by fraud	
	HAMMA ature of [D B MIAH Debtor 1	Signature of Debtor 2		
ate	May	2, 2019	Date		
id y	ou attach	additional pages to Your Statem	ent of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 1	07)?
No					
lΥe	es				
No)		ot an attorney to help you fill out bankrupt	•	
			uptcy Petition Preparer's Notice, Declaration,		
ificia	I Form 107	State	ement of Financial Affairs for Individuals Filing	for Bankruptcy	nage

Fill i	in this information to identify your case:		Che	ck one box only as	directed in	this form and in Fo	rm
Deb	otor 1 MOHAMMAD B MIAH			A-1Supp:			
	otor 2			1. There is no pre	sumption (of abuse	
	use, if filing) Eastern Districted States Bankruptcy Court for the: Division	ct of Michigan, Detroit			made und	erChapter 7 Means	
Cas	se number			Calculation (Of		,	a Carra PC and
(if kno			-	3. The Means Tes military service			or qualified
			·	Check if this is	an amen	ded filing	
Off	ficial Form 122A - 1					· ·	
	napter 7 Statement of Your C	urrent Monthly	/ Inco	ome			12/15
a sep	s complete and accurate as possible. If two married peoparate sheet to this form. Include the line number to white ber (if known). If you believe that you are exempted from any service, complete and file Statement of Exemption from the Calculate Your Current Monthly Income	ch the additional information n a presumption of abuse bec	applies. C ause you	on the top of any add do not have primarily	tional page	es, write your name a	and case
1.	What is your marital and filing status? Check one	e only.					
	☐ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fi	ill out both Columns A and F	3, lines 2-	11.			
	■ Married and your spouse is NOT filing with your	ou. You and your spouse	are:				
	Living in the same household and are not I	legally separated. Fill out b	oth Colur	nns A and B, lines 2	2-11.		
	☐ Living separately or are legally separated. penalty of perjury that you and your spouse are apart for reasons that do not include evading the second sec	e legally separated under nor	nbankrup	tcy law that applies o			
10 6	fill in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the months, add the income for all 6 months and divide the tota wn the same rental property, put the income from that prope	e 6-month period would be Marcal by 6. Fill in the result. Do not i	ch 1 throug nclude any	h August 31. If the am income amount more	ount of your than once.	monthly income varie For example, if both s	ed during the
				Column A Debtor 1	Columbo Debtor non-fil		
2.	Your gross wages, salary, tips, bonuses, overtine payroll deductions).	ne, and commissions (befo	ore all	\$0.00	\$	0.00	
3.	Alimony and maintenance payments. Do not included Column B is filled in.	ude payments from a spous	e if	\$0.00	\$	0.00	
4.	All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your househroommates. Include regular contributions from a sp. Do not include payments you listed on line 3	ort. Include regular contribu	utions	\$ 0.00	\$	0.00	
5.		on, or farm					
		Debtor 1					
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00			•	0.00	
	Net monthly income from a business, profession, or	r farm \$ 0.00 Copy	here -> S	0.00	\$	0.00	
6.	Net income from rental and other real property	Baltin 1					
	Gross receints (hefore all deductions)	Debtor 1 \$ 0.00					
i	Latrice receipte inditate all Medilations)	Ψ 0.00					

Official Form 122A-1

0.00

0.00 Copy here -> \$

0.00

0.00

0.00

0.00

Ordinary and necessary operating expenses

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

					Column A Debtor 1		Column B Debtor 2 or		
8.	Unemployment compensation				\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount in Social Security Act. Instead, list it here:	received was a bene	fit under th	e					
	For you g	\$	0.00						
	For your spouse S		0.00						
	Pension or retirement income. Do not include any am under the Social Security Act.				\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spe not include any benefits received under the Social Secur a victim of a war crime, a crime against humanity, or inte If necessary, list other sources on a separate page and p	rity Act or payments in actional or domestic out the total below.	received as	s	\$	0.00	\$	0.00	
	•				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.				\$	0.00	\$	0.00	
	Total amounts from separate pages, it any.			<u> </u>	Ψ	<u> </u>	Ψ	<u> </u>	
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$		0.00	+ = _	0.00	= \$	0.00
									rrent monthly
Part	2: Determine Whether the Means Test Applies to	o You						income	
12	Calculate your current monthly income for the year	Follow these steps:							
	12a. Copy your total current monthly income from line	•			Con	y line 11 l	noro->	¢	0.00
	12a. Copy your total current monthly income non-line	11			СОР	y iiile i i i	1616-2	Ψ	0.00
	Multiply by 12 (the number of months in a year)							x 1	2
	12b. The result is your annual income for this part of the	form					12b	. \$	0.00
13.	Calculate the median family income that applies to	you. Follow these st	eps:						
	Fill in the state in which you live.	MI							
	Fill in the number of people in your household.	3							
	Fill in the median family income for your state and size						13.	\$7	5,051.00
	To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy		k specified	ın	the separa	te instruct	ions for this		
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1	, check bo	x 1	T,here is no	presumpti	on of abuse.		
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check bo	x 2T,he pre	sui	mption of al	buse is det	termined by Fo	orm 122A-2	2.
Part	3: Sign Below								
	By signing here, I declare under penalty of perjury t	hat the information o	n this state	em	ent and in a	ny attachn	nents is true a	nd correct.	
	X /s/ MOHAMMAD B MIAH								
	MOHAMMAD B MIAH Signature of Debtor 1								
	Date May 2, 2019								
	MM / DD / YYYY								
	If you checked line 14a, do NOT fill out or file For	m 122A-2.							
	If you checked line 14b, fill out Form 122A-2 and f	file it with this form.							

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan, Detroit Division

In re	MIAH, MOHAMMAD B		Case No.			
•		Debtor(s)	Chapter 7			
		STATEMENT OF ATTORNEY FOR DEBTOR PURSUANT TO F.R.BANKR.P. 2016(b)	<u>(S)</u>			
	The undersigned, pursuant	to F.R.Bankr.P. 2016(b), states that:				
1.	The undersigned is the atto	orney for the Debtor(s) in this case.				
2.	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]					
	[X] <u>FLAT FEE</u>					
		es rendered in contemplation of and in connection with this ca filing fee paid				
	B. Prior to filing th	nis statement, received	1,640.00			
	C. The unpaid bala	ance due and payable is	0.00			
	[] <u>RETAINER</u>					
	A. Amount of retain	iner received	···			
	B. The undersigned have agreed to p	d shall bill against the retainer at an hourly rate of \$ [Coay all Court approved fees and expenses exceeding the amount	Or attach firm hourly rate schedule.] Debtor(s) nt of the retainer.			
3.	\$335.00 of the filing	g fee has been paid.				
4.	In return for the above-diseany that do not apply.]	closed fee, I have agreed to render legal service for all aspects	of the bankruptcy case, including: [Cross out			
	bankruptcy; B. Preparation and	lebtor's financial situation, and rendering advice to the debtor filing of any petition, schedules, statement of affairs and plan	which may be required;			
	D. Representation of E. Reaffirmations;	of the debtor at the meeting of creditors and confirmation hearing the debtor in adversary proceedings and other contested bands				
	F.—Redemptions; G.—Other:					
5.	By agreement with the deb	otor(s), the above-disclosed fee does not include the following	services:			
5.		the undersigned was from:				
	A. XX B.	Debtor(s)' earnings, wages, compensation for services perfor Other (describe, including the identity of payor)	med			
7.		hared or agreed to share, with any other person, other than wit	h members of the undersigned's law firm or			
Dated:	May 2, 2019	/s/ Ralp	h Kaczmarczyk			
	•	Attorney Ralph P	r for the Debtor(s) Kaczmarczyk D. Kaczmarczyk			
		Southfi	N 12 Mile Rd Ste 110 eld, MI 48034-8345 ⊉aol.com			
Agreed:						
	MOHAMMAD B MIAP	1 Debtor				